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CONFIRMATION NO. 5633

|                             |                                       |              |                        |  |
|-----------------------------|---------------------------------------|--------------|------------------------|--|
| SERIAL NUMBER<br>10/675,442 | FILING DATE<br>09/30/2003<br><br>RULE | CLASS<br>052 | GROUP ART UNIT<br>3635 | ATTORNEY<br>DOCKET NO.<br>PTOZ 2 00021 |
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\*\* CONTINUING DATA \*\*\*\*\*

none *gj*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

none *gj*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/23/2003

|  |  |                           |                        |                       |                            |
|--|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br><i>[Signature]</i><br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>OH | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>27 | INDEPENDENT<br>CLAIMS<br>5 |
|--|--|---------------------------|------------------------|-----------------------|----------------------------|

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TITLE

Screen with integral railing

|                                    |   |   |
|------------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>1044 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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